Docket No. MBI-1162US

## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

**English Language Declaration** 

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

## SHADE WITH THERMOCHROMIC TEMPERATURE SENSOR

the specification of (check one)	which		
X is attached here	to.		
was filed on	as Unito	ed States Application No. or PCT In ed on  (if applicable)	nternational Application No.
I hereby state that I including the claim	have reviewed and und s, as amended by any ar	erstand the contents of the above ic mendment referred to above.	lentified application,
1.56, including for	continuation-in-part applate of the prior applicat	tion which is material to patentabil blications, material information whition and the national or PCT internation	ch became available
application(s) for pa application which dand have also ident plant breeder's righ	atent, or plant breeder's lesignated at least one c ified below, by checking	ler 35 U.S.C. 119(a)-(d) or (f), or 30 rights certificate(s), or 365(a) of arountry other than the United States g the box, any foreign application for international application having I.	ny PCT International of America, listed below or patent, inventor's or
Prior Foreign Appli	cation(s)		Priority Not Claimed
(Number)	(Country)	(Day/Month/Year Filed)	<del></del>
(Number)	(Country)	(Day/Month/Year Filed)	
(Number)	(Country)	(Day/Month/Year Filed)	

I hereby claim the benefit under 35 U. listed below:	S.C. Section 119(e) of any Un	ited States provisional application(s)
(Application Serial No.)	(Filing Dat	te)
(Application Serial No.)	(Filing Dat	te)
(Application Serial No.)	(Filing Dat	te)
I hereby claim the benefit under 35 U. 365(c) of any PCT International application application application in the manner acknowledge the duty to disclose to the to me to be material to patentability as between the filing date of the prior apparapplication:	cation designating the United Sthis application is not discloser provided by the first paragrage United States Patent and Tradefined in Title 37, C.F.R., S	States, listed below and, insofar as the ed in the prior United States or PCT ph of 35 U.S.C. Section 112, Indemark Office all information known ection 1.56 which became available
(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)
(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)
(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the U.S. Patent and Trademark Office connected therewith. (*list name and registration number*)

John L. Knoble – Registration No. 32,387 Ken I. Yoshida – Registration No. 37,009 Kevin J. Dunleavy – Registration No. 32,024 Tod Kupstas – Registration No. P-54,917 Paul Roath – Registration No. 45,045

Send Correspondence to:

KNOBLE YOSHIDA & DUNLEAVY, LLC Eight Penn Center, Suite 1350 1628 John F. Kennedy Blvd. Philadelphia, PA 19103

Direct Telephone Calls to: (name and telephone number)

John L. Knoble at (215) 599-0600

Date

Full name of second inventor, if any	
Second inventor's signature	Date
Residence	
Citizenship	
Post Office Address	